

SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES
2000 PRIMARY AND GENERAL ELECTIONS

State of Nevada

TED FULLER TRUSTEE 11610
Candidate's Name(print) Office District (if applicable)
P.O. Box 9223 INCLINE VILLAGE NV 89452 775-331-3474
Mailing Address (include city and zip code) Telephone Number

REPORT NUMBER 3 - DUE JANUARY 15, 2001

Report Period **Begins:** October 26, 2000

Report Period **Ends:** January 5, 2001

CONTRIBUTIONS SUMMARY

1. From Report Numbers 1 and 2, total amount of contributions in excess of \$100	_____
2. From Report Numbers 1 and 2, total amount of contributions of \$100 or less	_____
3. Report Number 3, total amount of contributions in excess of \$100	_____
4. Report Number 3, total amount of contributions of \$100 or less	_____
From Report Numbers 1, 2, and 3, actual number of contributions of \$100 or less _____	
6. Interest and income earned, if any, during this report period	_____
7. TOTAL AMOUNT OF ALL CONTRIBUTIONS (add lines 1 through 6)	<u>0</u>

EXPENSES SUMMARY

8. From Report Numbers 1 and 2, total amount of expenses in excess of \$100	<u>5180</u>
9. From Report Numbers 1 and 2, total amount of expenses of \$100 or less	<u>200</u>
10. Report Number 3, total amount of expenses in excess of \$100	<u>1631 82</u>
11. Report Number 3, total amount of expenses of \$100 or less	<u>*</u>
12. TOTAL AMOUNT OF ALL EXPENSES (add lines 7 through 11)	<u>7011 82</u>

If no contributions or expenses are listed during this Report Period, only this page of the report needs to be filed with your filing officer.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 2-21-00
Date

T. Fuller
Signature of Candidate

*TED FULLER**President**11610*

Candidate's Name (print)

Office

District (if applicable)

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
U.S. POSTAL SERVICE 1601 N. MILLER AVE IV. NY. 89451-9604	D	11-1-00	894 ⁸²
SHAWA DISCOUNT PRINTING P.O. Box 4216 IV. NY. 89450	D	11-1-00	737 ⁰⁰

This page may be copied or duplicated if additional space is needed.

Ted Feller
Candidate's Name (print)

TRUSTEE
Office

1V610
District (if applicable)

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	B	
Expenses related to travel	C	
Expenses related to advertising	D	1631 ⁰⁰ 2
Expenses related to paid staff	E	
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	H	
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses	J	